HEWLETT-PACKARD COMPANY
Intellectual Property Administration
P. O. Box 272400
Pare Sellins, Colorado 80527-2400

PATENT APPLICATION

ATTORNEY DOCKET NO. 20040126-1



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Gupta, et al.

Confirmation No.:

Application No.: 10/764,147

Examiner: Rochelle Blackman

Filing Date:

01/23/2004

Group Art Unit: 2851

Title:

A METHOD OF CONTRAST ENHANCEMENT IN DIGITAL PROJECTORS

Mail Stop RCE
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

## REQUEST FOR CONTINUED EXAMINATION (RCE) 37 CFR 1.114

Subsection (b) of 35 U.S.C. 132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995.

See The American Inventors Protection Act of 1999 (AIPA).

Sir:

This is a Request for Continued Examination (RCE) under CFR 1.114 of the above-identified application.

NOTE: 37 CFR 1.114 is effective on May 20, 2000. If the above- application was filed prior to May 29, 2000, applicant may wish to consider filing a continued prosecution application (CPA) under CFR 1.53(d) (PTO/SB/29) instead of a RCE to be eligible for the patent term adjustment provisions of the AIPA. See Changes to Application Examination and Provisional Application Practice, Interim Rule, 65 Fed. Reg. 14865 (Mar. 20, 2000), 1233 off. Gaz. Pat. Office 47 (Apr. 11, 2000), which established RCE practice.

## Submission under 37 CFR 1.114

| (X)                | Previously submitted:  |  |
|--------------------|--|--|
|                    | (X) Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on                 | 25/2005  |
|                    | ( ) Consider the arguments in the Appeal Brief or Reply Brief previously filed on          |  |
|                    | ( ) Other  | <i>,</i>   |
| (X)                | Enclosed:  |  |
|                    | (X) Amendment/Reply  |  |
|                    | ( ) Affidavit(s)/Declarations(s)   |  |
|                    | ( ) Information Disclosure Statement (IDS)   |  |
|                    | ( ) Other  |  |
|                    | Miscellaneous  ( ) Suspension of action is requested under 37 CFR 1.103(c) for a period of | 7557   |
|                    | ( ) Suspension of action is requested under 37 CFR 1.103(c) for a period of                | months.  |
|                    | The fee for this Suspension is (37 CFR 1.17(i)) \$130.00                                   |  |
|                    | ( ) Other  | <u>ું</u> .  |
|                    |  |  |
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|                    |  | 9 3  |
|                    | Rev 10/03 (RCE)  | Solves So |
| 04/08/2005 EFLORES | 5 00000086 082025 10764147   | Page 1012 ga   |

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## - CONTINUED EXAMINATION TRANSMITTAL (RCE) (37 CFR 1.114) (continued)

ATTORNEY DOCKET NO. 20040126-1

| (X)                 | RCE (                                | filing fee \$770.00  | ı   |  |
|---------------------|--------------------------------------|--|---|--|
| ()                  | A Pe                                 | tition for Extension   | on of Time  |  |
| ` .                 | ()                                   | one month  | \$110.00  |  |
|                     | $\dot{\mathbf{O}}$                   | two months   | \$420.00  |  |
|                     | 65                                   | three months   | \$950.00  |  |
|                     | ()                                   | four months  | \$1480.00   | ·  |
| Acc<br>08-2<br>Fede | dency<br>ount (2025<br>eral R<br>(X) | of this application of this applications of the control of the con | on, please charge any to 37 CFR 1.25. At 16 through 1.21 inclus ay regulate fees.  Ye of this transmittal let | the sum of At any time during the fees required or credit any overpayment to Deposit dditionally please charge any fees to Deposit Account sive, and any other sections in Title 37 of the Code of ter is enclosed.  Respectfully submitted. |
|                     | depos<br>first c<br>Comm<br>22313    | ited with the United S<br>lass mail in an envelop<br>hissioner for Patents, A<br>3-1450. Date of Depo<br>OR  | lexandria, VA<br>osit: <u>04/05/2005</u>  | Gupta, et al.  By Story Men 51, 182  |
| ( )                 |                                      |  | per is being transmitted  | ∰ William T. ⊟lis  |
|                     |                                      | Patent and Trademar<br>er  |   | Attorney/Agent for Applicant(s)  |
|                     | 1101115                              | G  |   |  |
|                     | Numb                                 | er of pages:   |   | Reg. No. 26,874  |
|                     | _                                    |  | 1   | Date: 04/04/2005   |
|                     | Typed                                | Name Michelle Sym  | psgn/ //  |  |
|                     | Signa                                | ture://///////   | ly flympso.   | Telephone No.: (202) 672-5485  |
|                     |                                      |  |   |  |

| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003   |   |  |               |                               |                     |                  |             |                         |               |                  |                |                     |           |                   |
|--|---|--|---------------|-------------------------------|---------------------|------------------|-------------|-------------------------|---------------|------------------|----------------|---------------------|-----------|-------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |  |               |                               |                     |                  |             | MALL E                  | NTI           | Υ                | OR             | OTHER<br>SMALL      |           |                   |
| TOTAL CLAIMS   |   |  | 28            |                               |                     |                  |             | RATE                    |               | EE               |                | RATE                | FE        | Ξ                 |
| FOR  |   |  | NUMBER FILED  |                               | NUMBER EXTRA        |                  |             | BASIC FEE 385.00        |               | 5.00             | OR             | Basic Fee           | 770       | .00               |
| TOTAL CHARGEABLE CLAIMS  |   |  | U minus 20=   |                               | . 8                 |                  |             | X\$ 9=                  |               |                  | OR             | XS18=               | 146       |                   |
| INDEPENDENT CLAIMS   |   |  | 5 minus 3 = 2 |                               |                     |                  | X43=        |                         | OR            | X86=             | 120            |                     |           |                   |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |  |               |                               |                     |                  | +145=       |                         |               | OR               | +290=          |                     |           |                   |
| • H,   | * If the difference in column 1 is less than zero, enter "0" in column 2  |  |               |                               |                     |                  |             |                         | 十             |                  | OR             | TOTAL               | 10        | 6                 |
| 9 J. 9 (Column 1) (Column 2) (Column 3)  |   |  |               |                               |                     | )                | SMALL       | ENT                     | ITY           | OR.              | OTHER<br>SMALL |                     |           |                   |
| MENDMENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENIOMENT   |               | HEGH<br>NUM<br>PREVIO<br>PAID | EST<br>BEA<br>DUSLY | PRESENT<br>EXTRA |             | RATE                    | TIO           | DI-<br>NAL<br>EE |                | RATE                | AD<br>TIO | NAL               |
| DM   | Total   | • 17   | Minus         | <b>-</b> 2                    | 8                   | :                | ] [         | X\$ 9=                  |               | 1                | OR             | X\$18≖              |           |                   |
| É  | Independent   | • 5  | Minus         | ر سو                          | 5                   | -                | Н           | -X42-                   | 1             |                  | OR             | X86=                |           |                   |
| ٩  | FIRST PRESE   | RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |               |                               |                     |                  | J │         | +145=                   | 厂             | -                | OR             | +290=               |           |                   |
|  |   |  |               |                               |                     |                  | ·           | TOTAL                   |               |                  | OR             | TOTAL               | _         | ⊣                 |
|  |   | 10 at a 1)                                   |               | (Calisa                       | 2\                  | (Column 3)       |             | ADDIT. FEEOH ADDIT. FEE |               |                  |                |                     |           |                   |
|  | سمعد  | (Catumn 1)<br>CLAIMS                         |               | HIGH                          |                     | ነ ፫              |             | ADDI-                   |               | ا                | <u> </u>       | AD                  | DI.       |                   |
| MENDMENT B   | 1/38/02   | REMAINING<br>AFTER<br>AMENDMENT              |               | PREVI                         |                     |                  | $\rfloor$ [ | RATE                    | TIONAL<br>FEE |                  | ľ              | RATE                | TIO       |                   |
| DM   | Total ·   | . 9  | Minus         | *                             | 18                  | •                |             | X\$ 9=                  |               |                  | OR             | X\$18=              |           |                   |
| ME   | Independent   | ・ ろ  | Minus         | <b>**</b> -                   | 5                   | 0                | 4 [         | X43± .                  |               |                  | OR             | X86=                |           |                   |
|  | FIRST PRESE   | NTATION OF MI                                | ATIPLE DEF    | ENDENT                        | CLAIM               |                  | ] [         | +145=                   | Π             |                  | OR             | +290≖               |           | . [               |
| ••   |   |  |               |                               |                     |                  |             | TOTAL                   |               |                  | OR             | TOTAL<br>ADDIT. FEE |           |                   |
|  |   | (Column 1)                                   |               | (Colur                        | nn 2)               | (Column 3        |             |                         |               | 1                |                |                     |           |                   |
| ENTC   | 47/05   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    | ·             | HIGH<br>MUM<br>PREVIO<br>PAID | BER                 | PRESENT<br>EXTRA | ][          | RATE                    | TIO           | NAL<br>EE        |                | RATE                | πο        | IDI-<br>NAL<br>EE |
| MO   | Total   | . 9  | Minus         | .0                            | 28                  | •                | ] [         | X\$ 9=                  |               |                  | OR             | X\$18•              | \         |                   |
| AMENDMENT  | Independent   | 5  | Minus         | •••                           | 5_                  | 0                | 4.1         | X43=                    |               |                  | OR             | X86=                |           |                   |
|  |   | NTATION OF M                                 |               |                               |                     |                  | ┙┆          | +145=                   |               |                  | OR             | +290=               |           |                   |
| •  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IM THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR  TOTAL  ADDIT. FEE |  |               |                               |                     |                  |             |                         |               |                  |                |                     |           |                   |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |  |               |                               |                     |                  |             |                         |               |                  |                |                     |           |                   |